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EDITORS.

A DOCTOR AS GOVERNOR.

On the first day of May there transpired in this city a professional event which has no fellow in history. The controlling political party of the state, in full convention assembled, nominated for the governorship of Kentucky Dr. L. P. Blackburn, and nominated him because he was a doctor.

A year or so ago Dr. Blackburn announced himself as a candidate for the governor's chair and entered upon a canvass, but his success seemed doubtful. His fellow contestants for the nomination were from the best material his party afforded. If he was to the manner born, so were they. If he had been consistent in his political principles, so had they. If he rapidly developed a talent for oratory in the new field he had chosen and presented his claims persuasively to the people, they had come into the contest as trained speakers. In such matters as these they were his equals. In others which more greatly determine political success Dr. Blackburn's opponents were his superiors. His name was upon no slate, was strung upon no wire. They had made their combinations and ciphered their success for years, and were adepts in all political machinery. To use the native figure, although it is said he had in early days in some minor event shown tolerable speed, his first real entry was for a four-mile race against starters who had already secured many a purse. Dr. Blackburn may always have thought that his victory was secure, but at any rate his friends for a long time were anxious. It was only when he ceased to be the politician in the eyes of the people, and they saw in him the doctor, that his success was assured.

In August last the yellow fever, which had been slaying its thousands in the Mississippi Valley, was approaching our borders, and fears were aroused that it would enter them. Dr. Blackburn, who was then pressing his campaign in the interior of the state, dropped it and came to consult with the authorities of Louisville concerning the safety of the city. A few days later came the cry from Hickman that the plague indeed had passed our southern line. That was the last doubtful day in Dr. Blackburn's canvass. The next found him in Hickman with the sufferers, and the work of the disinterested philanthropist, which was to outdo all the shrewdness of the politicians, began. The world knows the rest—how he remained with the people of Hickman while the fever was raging; how when it seemed to be subdued he sought in Tennessee other stricken spots; how, when the news came that the plague had again burst forth in Hickman, he returned there to his post, and held it until the frosts of October declared a permanent truce. Then came the applause of the people upon his return to his home, and the hurrahs throughout the state. So genuine and warm was the admiration his conduct had elicited, that for a time few dared to think he could be successfully opposed in whatever he wished from the state. But after awhile the wiseacres said this was a little sentiment which the winter would cool down before the time came for action in the spring; and the people would forget these things, and fall into the line which the

managers would lay down. But the sentiment did not cool, and a republic for once at least was grateful, and the managers fell into the line which the people drew for them. When the day came for the nomination, and Gen. Duke so gracefully proposed Dr. Blackburn's name, not as a candidate from Louisville, but from the whole people of the state, every other opponent withdrew, and Dr. Blackburn was by the acclamation of a thousand voices given to the people of Kentucky as their governor.

We have recorded in these pages this event from politics, for it was no less professional; and, as we have said, it has had no fellow in history. Doctors in plenty have indeed been in politics, at home and abroad, and have won high honors in the state, but we know of no other instance where a doctor has been given the highest office in the gift of the people as a reward for professional services. We congratulate our comrade, whose success sheds honor not upon himself alone but upon the profession of medicine.

THE SCHOOL CONVENTIONS AT ATLANTA.

The accounts from the conventions of the schools at Atlanta are very encouraging. At the mass meeting of the colleges, which was held on May 2d, nearly thirty colleges were represented, including several schools which were not members of the College Association. The almost unanimous desire of this body was that a preliminary examination, embracing a fair knowledge of English and of the elements of physical sciences, should be demanded of matriculates, and three courses of lectures in three separate years should be required of graduates. The meeting was only advisory and adjourned *sine die*.

The regular Association of the Colleges convened on the 3d of May, and continued its session two days. The report of the secretary showed a very healthy condition of affairs. Twenty-eight colleges are already in the Association, and the applications of several others are pending. Twenty-one colleges were represented in the meeting.

Among the business transacted was the consideration of the recommendation from the mass meeting in regard to the matter of requiring preliminary examinations and three courses of lectures. Under the rules of the Association the matter lies over for a year. The requirements will no doubt soon be demanded.

The following document, copies of which were a number of months since transmitted to all the colleges of the Association, was presented to the meeting:

NOVEMBER 15, 1878.

Secretary of American Medical College Association:

DEAR SIR—The undersigned, a committee appointed June, 1878, to report a "plan for the registration of medical colleges in good standing," and representing respectively the Bellevue Hospital Medical College, the Jefferson Medical College, and the Chicago Medical College, prefer the following charge and specification against the Louisville Medical College and the Kentucky School of Medicine:

Charge: That the Louisville Medical College and Kentucky School of Medicine, separately and together, have violated and continue to violate sec. 3, art. 2 of the "Articles of Confederation" of the Association, which reads as follows: "Not more than one regular session, counting the regular session as one of the two courses of instruction required for graduation, shall be held in the same year."

Specification: The violation of section 3, article 2 of the "Articles of Confederation" consists of the following organization of the Louisville Medical College and the Kentucky School of Medicine, as shown by the last annual announcements of said colleges.

(Signed) AUSTIN FLINT, JR.,
S. D. GROSS,
N. S. DAVIS.

As the law requires that the accusing college must be present by delegate when charges are presented, and as Prof. Flint, of Bellevue, the chairman of the committee of registration, was absent, the charges could not be entertained. Without a trial no official expression could be obtained at this meeting in regard to their merits. Profs. Gross and Davis rather naively declined responsibility for the charges dated 15th of November, 1878, and widely disseminated throughout the country. The Kentucky-

Louisville School was present in force, with professors, trustees, and counsel, and with an elaborate defense printed (which of course could not be got before the Association) showing that although the two institutions possessed in common the same faculty and household goods (rooms in the Odd Fellows' Hall, of Louisville, wax model, mannikin, etc.), there were two separate and distinct boards of trustees, responsible possibly for the rent and repairs on the same, and therefore they were two colleges.

Professor Flint, in addition to and apart from the charges above referred to, made an elaborate report upon the irregularities of a number of schools, in which the matter of the charges against the Kentucky-Louisville School again appear. A strenuous effort was made by the Kentucky-Louisville School to expurgate the report of that portion reflecting upon its conduct, but failed. It seems to us a little odd that Prof. Flint should not have been present to back up his indictment and justify his report; and it was considered by several of the members to be rather hard that the Kentucky-Louisville School should for another year rest under the imputation of the charges brought against it, which, while they could not be entertained for the reasons given, reäppear in the general report upon irregularities, to which the names of Profs. Gross, Davis, and Flint are signed. After some discussion, however, on motion of Prof. John Murphy, of Cincinnati, the report of the committee upon registration and corrections was recommitted for another year. We will hope that the wisdom of the Kentucky-Louisville School, which under the teaching of the NEWS has been somewhat progressive during the past three years, will reach such a point by the time the twelvemonth is out to allow the committee to report it as all right.

Prof. Bodine offered a resolution forbidding credit being given to a student for two courses of lectures, when the same were taken within less than fifteen months; also one forbidding gratuitous instruction otherwise than as set forth in sections of the law of the Association bearing on these matters. They were offered to define the law, which was being infracted by the Kentucky-Louisville School —unwittingly of course—and were adopted. Prof. Bodine also offered an amendment to article 1 of the Articles of Confederation, in words as follow: "A majority of the members of one faculty shall not constitute the majority of the members of another faculty unless the sessions of the two schools are held simultaneously," which under the rules lies over till next year, when no doubt it will become the law.

Dr. A. B. Cook, of the Kentucky-Louisville School, offered a resolution to the effect that this association should reprimand any of its members found "tampering" with the students of other colleges. It caused somewhat of a smile in the association, as it was rather the opinion of the members that the matter was already provided for by the general laws of the decalogue and the usages of gentlemen. After an anxious suspense, no second appearing, the motion fell to the ground.

A resolution by Dr. Chaillé, of New Orleans, that it was derogatory to the dignity and good standing of any medical college to advertise in any other than a strictly medical publication the names of its professors with their respective chairs, was carried.

Resolutions of respect to the memory of Prof. Biddle, the late president of the association, were adopted by a standing vote. The officers for next year are: President, Prof. S. D. Gross; Vice-president, Prof. N. S. Davis; Secretary, L. Connor.

The third annual meeting of the Association of American Medical Colleges was highly successful. Its reforms may not be radical enough to please the impracticable few, but it is moving steadily on, and is undoubtedly solving the great problem of how the standard of American medical education is to be advanced. We are glad to know that the Association meets next year in New York, which offers a first-rate missionary field.

THE Kentucky-Louisville School is very naturally elated over the fact that when the charges against it, signed by Austin Flint, jr., of Bellevue College, N. S. Davis, of the Chicago College, and S. D. Gross, of the Jefferson College, were brought up at the meeting of the College Association, Prof. Flint was not present and Professors Gross and Davis declined the responsibility of the prosecution, so that the matter fell to the ground until the meeting next year, when it will reäppear in the report upon irregularities prepared by Prof. Flint and signed also by Profs. Davis and Gross. It was a pity that the elaborate defense prepared by its eminent counsel and printed apparently at such expense, could not be got before the Association nor the voice of its eloquent authors be heard; and it was rather natural that sooner than lose the defense the school should print it in the Courier-Journal newspaper, especially as it afforded some opportunity of apparently clearing up a reputation which for some years has not been strictly brilliant at home. When the "friend of the Kentucy School," however, informs the reporter that the charges doubtlessly emanated from Louisville from some one influenced by a mercenary motive, we must doubt the truth of the imputation. We are quite certain that any business of this sort originating in Louisville would have been referred to the NEWS, which by common consent has in this quarter been allowed the extra-faculty care of the Kentucky-Louisville School; and our readers we think will bear us witness that any charges emanating from the NEWS or indorsed by the NEWS bear no doubtful impress as to their meaning or origin. The fact is we have regarded the charges offered by Profs. Flint, Davis, and Gross with indifference since we first heard of them. We have been quite content with the reform we had already effected in the Kentucky-Louisville School, and willing for time to work out what might be further needed to make that institution a strictly proper one.

There is danger of death sometimes in a too sudden reformation. We certainly do not wish that fate for our industrious friend, but rather that it should taper off gradually toward the better life. Again we express our wishes that when the report on irregularities comes up next year the Kentucky-Louisville School will have profited by experience, and learn that a good name is better than the doubtful riches of a summer graduating attachment.

A DOCTOR at the head of public affairs will be a novel spectacle, and it will be curious to see what skill his training will give him in caring for the body politic. There are, to be sure, some matters directly medical to be attended to—the state board of health and the physicians to the several asylums, which are under the governor's appointment. We believe these matters have been pretty well attended to by the non-professional predecessors of Dr. Blackburn. His more direct interest in such affairs may, however, develop some changes for the better. We sympathize with Dr. Blackburn here in the embarrassment of his riches. Out of the twenty-five hundred doctors in the state about two thousand belong to Dr. Blackburn's party, and a very respectable representation of this body was in his convention. The returns are not all in, but it would appear that about one hundred doctors for each asylum would be a fair estimate of the number of applicants up to date. We trust the doctor will be able to make a selection from these, but we do not envy him the task.

THE Kentucky State Medical Society can do no better work at its meeting next week than in electing Dr. L. P. Blackburn to the presidency for next year. It will be a fitting tribute to Dr. Blackburn and to the memory of the heroes of Hickman. It will be grateful to the profession of the state, and to the people who have honored the profession in calling Dr. Blackburn to the chief magistracy of the state. The NEWS proposes Dr. Blackburn, and asks for a three-times-three!

PROF. GEO. B. WOOD died in Philadelphia, March 30th, in the eighty-second year of his age. He was during the greater portion of his active life connected with the University of Pennsylvania, in which he filled at different times the chairs of Materia Medica and of Practice. He was the chief author of the United States Dispensatory, which gave him a wider reputation than that achieved by any other American physician. His other principal works were a Treatise on Practice and one on Materia Medica and Therapeutics, both of which have had a very extensive sale.

Interesting accounts of Prof. Wood's life have appeared in the Medical Times and other northern journals. He had been so long retired from active professional labors that most of the present generation of doctors only know of his personal traits through tradition. He made a lasting impression on the older generation. Such men as Lewis Rogers and George Bayless delighted to tell of his industry, his method, his exquisite refinement and culture which had charmed them in their student-days. His books all give evidence of these; and though new authorities have pushed them to a great extent from the present field of medical literature, they must always command the attention of the student. The dignity and truthfulness with which the themes therein are pursued will ever present lessons which no rival can surpass.

THE officers elect in the American Medical Association for next year are: President, Lewis Sayre, of New York; Vice-presidents, R. B. Cole, of California; E. M. Hunt, of New Orleans; D. March, of Massachusetts; F. B. Porcher, of South Carolina. New York is the next place of meeting.

DR. WM. M. GRIFFITHS, of this city, has secured the appointment of Acting Assistant Surgeon of the U. S. Marine Hospital at Louisville. The appointment will give much satisfaction to Dr. Griffiths's many friends.

THE Medical Herald made its appearance as promised, promptly on the first of May. The editor has shown great industry in his enterprise, and has enlisted the support of a large number of contributors for the initial number. Although the fifth journal in the field of Louisville, the Herald gives excellent promise of permanency.

Original.

A CASE OF PURPURA HEMORRHAGICA.

BY R. F. STONE, M. D.

L. J. S., aged thirty, height six feet, weight one hundred and seventy-five pounds, dark complexion, robust constitution, and by avocation a farmer. Has had good health, except hemorrhoids, for three or four years, from which he has lost considerable blood, from one to four drams daily at intervals. For the last five or six weeks has complained of general lassitude, or debility, and some mental despondency. About December 11, 1876, purple spots of petechiæ made their appearance upon the arms, legs, and other parts of the body, which in a day or so were followed by rather profuse hemorrhage from the bowels — perhaps half a pint of blood daily—till the 14th, when bleeding from the nose occurred, the epistaxis lasting eighteen hours. Was first called to see him on the 15th; found him in rather feeble condition, although able to sit up, pulse normal, and with no febrile symptoms. Petechiæ upon skin when first seen were hardened lumps under the integument, which occasioned an itching sensation, causing the patient to rub or scratch them, when they would bleed slightly. The same purple spots were observed also upon the mucous membrane of tongue, mouth, etc.

℞ Plumbi sub acetat..... gr. iij;
Pulv. opii..... gr. j. M.

S. Every four hours, in dilute vinegar, alternated with half a dram of fluid ext. ergot to favor contraction of blood-vessels. Also injected tepid water and vinegar to nostrils for the epistaxis.

December 16th: Hemorrhage from nose checked, but that from bowels increased.

℞ Fl. ext. ergot..... } āā gtt. x.
Spts. turpentine..... }

S. Every four hours, alternated with five grains gallic acid. Was called to patient

in night, who was bleeding profusely from kidneys, bowels, and gums, passing from the kidneys half a pint of blood every two or three hours, and about same amount from the bowels as often. The blood from gums would amount to perhaps a pint daily. Turpentine was omitted, and commenced the acetate of lead and opium again.

December 17th: Patient no better.

℞ Ar. sulph. acid ..... } ℥ℨ gtt. xx.
Tinct. opii..... }

S. Every four hours, alternated with three grains quiniæ sulph. and half an ounce of whisky. Diet—Raw eggs, soft-boiled eggs, and raw oysters *ad libitum*, and bathed him with tepid water and vinegar. Directed one dram of sulph. magnesia every four hours. Emp. canth. 3 x 6 in. to be applied to back of neck and between the shoulders.

December 18th: Patient getting very weak and despondent. General hemorrhage unchecked. Drs. W. C. Harris and J. B. Cross were requested to see patient, who advised continuation of treatment.

December 19th: Bowels moved freely, and a good blister was obtained. Hemorrhage abating from all points except the kidneys. Continued gallic acid with ar. sulph. acid and opium.

December 20th: Patient complains of the medicine sickening him, and has no appetite.

℞ Tinct. ferri chlorid..... gtt. xx;
Quiniæ sulph..... gr. j.

S. Every four hours.

December 22d: Hematuria almost ceased, and bleeding checked from other points; petechiæ fading; appetite not good.

December 26th: Patient has had more or less hemorrhage for the last three or four days.

℞ Citrate iron..... gr. iij;
Strychnia..... gr. $\frac{1}{24}$.

S. Every four hours.

December 27th: Hemorrhage ceased and patient convalescing.

January 5, 1877: Patient has had no appetite, but has been taking the citrate of iron and strychnine since the 27th of December.

℞ Tinct. ferri chloridi..... gtt. xx;
Strychniæ..... gr. $\frac{1}{24}$.

every six hours.

January 15th: Patient has been on tinct. ferri chl. and strych. for last ten days, which has given him a voracious appetite; so much so as to produce plethora and epistaxis. Tr. ferri omitted, and continued strychnine.

January 20th: Has had hemorrhage from nose and gums more or less constantly since the 15th, though able to sit up; has been out of doors and taken some cold; is somewhat feverish for the first time; pulse 90, and complains of oppression in breathing; thinks he had a chill this morning. Ordered three grains quinia sulph. every three hours and a purge of sulph. magnesia.

January 21st: Patient bled profusely from nose all night previous, and is bleeding from gums now, and still complains of pain and oppression over lungs. Pulse 80. ℞ Emp. canth. 3x6 over the sternum.

℞ Fl. ext. ergot..... ℥ ij;
Tinct. digitalis ..... ℥ ij
Gallic acid..... ℥ j;
Ar. sulph. acid ..... ℥ j;
Magnesiæ sulph..... ℥ v;
Aquæ ..... ℥ vj. M.

S. Two tablespoonfuls every three hours till the hemorrhage ceases; and comp. tinct. of benzoin on cotton wool to gums, to act as a local astringent.

January 23d: The cotton saturated with comp. tinct. benzoin controlled hemorrhage from gums. Hemorrhage from the nose continues. Increased the ergot in the foregoing prescription to one dram each dose, and ordered one twenty-fourth grain of strychnine every six hours to be given again.

January 24th: Epistaxis was rather profuse from eight to eleven o'clock last night, but less than former attacks. At two o'clock P. M. patient for the first time in six weeks was *entirely clear of hemorrhage from any point*, and has been so since eleven o'clock last night. Continued strychnine and omitted all other medicine. Directed, however, ten drops of liq. ferri sub. sulph. to one ounce of water to be used by nasal douche in case epistaxis should again take place. He has no fever, no fresh purple spots, and the old petechiæ have assumed a brownish color. Patient feels better, is more cheerful, and is sitting up.

February 7th: Patient has not bled much since 24th of January, except from hemorrhoids; has taken the strychnine continuously.

February 9th: Decided to operate for hemorrhoids.

℞ Pil hydrarg..... gr. x;
Ol. ricini..... ℥ ss

every four hours.

February 10th: Bowels thoroughly purged. Ligated hemorrhoidal tumors and kept bowels checked with opium four days. Bowels moved by oil; no hemorrhage. Ligatures came away on sixth day. Since which time

he has taken no medicine. No secondary hemorrhage from ligating hemorrhoidal tumors, though patient has complained of neuralgia, and has vertigo for a few days from anæmia and indigestion.

March 1st: Patient walked into town yesterday. Says he feels better than he has for four or five years. No hemorrhage for two or three weeks, and is gaining strength rapidly.

This attack lasted about two months, and I think the patient lost over two gallons* of blood. I think the gallic acid and aromat. sulph. acid acted more promptly in arresting hemorrhage. If I had another case I should use them in alternation with strychnine and ergot, as in the treatment of the latter stages of this disease. The strychnine had more effect in controlling the hemorrhage than the ergot, because the latter does not exert the same power over the sympathetic nerves. The blood of this patient readily coagulated, showing that it was not due to deficiency of fibrin, but rather to exhaustion of sympathetic nerves controlling the capillaries. Comp. tinct. benzoin was the best application to the gums, and liq. ferri subsulph. and tepid water for epistaxis. Benefit was also obtained from vesication, I am not able to say whether by increasing the fibrin, by inflammatory action, or whether due to stimulation of the nervous system, or from its revulsive effect; but was employed at first to increase the fibrin. At all events I think it useful, and should be employed in bad cases.

BAINBRIDGE, IND.

*The text would indicate more than five gallons were lost during the two months. Nearly half this amount came away between the night of December 16th and December 19th. The successful ligation of hemorrhoids under such adverse circumstances is not the least interesting point in this extraordinary case, and tells greatly in favor of the old operation in face of its recent rival—injection. From a review of the notes it would seem that an earlier exhibition of quinine, and in ten- or fifteen-grain doses, might have been beneficial.

SALICYLIC ACID IN RHEUMATISM.

BY P. B. SCOTT, M. D.

The recent skeptical expression of Prof. Stillé, an authority so widely read and accepted on therapeutics, as to the efficacy of salicylic acid in the treatment of acute rheumatism, has naturally invoked new questioning into the peculiar and comparative merits of this remedy. There is ground for criticism when a distinguished clinical teacher, with large facilities for trial and observation condemns without personal test an agent which has reached the general repute of being nearly a specific. As he seems to have formed his judgment on derived evidence, it is hoped the balance is yet poised, and that recently-expressed opinion may yet so far preponderate in its favor with him as to lead to personal trial.

To this I beg to throw in the experience of a score of cases in general practice. In only one were the results disappointing, the subject being over seventy, and some of the joints were tender and swollen for six weeks, yet she was able to walk about with tolerable comfort on the twenty-first day. Certainly there was marked relief of pain and fever and the comfort of fair rest and good appetite. In no other case did the active course extend beyond ten days. In no case were there unpleasant symptoms of any kind. The elixir of the sodium salt was used, and generally found palatable. In no instance was its exhibition disturbing to the stomach, but on the contrary was in most of cases attended by increased appetite. In my two latest cases its curative power was marked, in comparison with previous treatment by other plans.

One, a middle-aged adult in health, had his sixth seizure since manhood. Each of the preceding had lasted over six weeks. I saw him on the second day of a well-begun acute form, with a temperature of 103° and a pulse of 110. His bowels were cleared, his joints were wrapped in cotton wool, he was allowed lemonade for drink, and given ten grains of salicylic acid in the elixir of sodium salt every three hours. He took no anodyne, but when the pain was greatest he shortened the interval to two hours. On the fifth day his temperature was 100°; on the sixth he had no fever and was free from pain and swelling, and on the tenth he was out, and now, two months since, he has been well.

The other case I attended three years ago, and treated with alkalies. Its duration then was three weeks. The young man was treated for a week with large doses of quinine and with morphine. When I was called on the eighth day he had general arthritis and slight endocarditis. He was given ten grains of the acid every three hours and opium and belladonna. In two days the latter were not required, and in five days he was free from fever and pain. In ten days he returned to his work with only a little tenderness and stiffness of one ankle. I could

draw upon my note-book for other cases in which the value of this remedy was equally well attested. Compared with alkalies, its taking is infinitely more pleasant and its curative power prompt, striking, and permanent.

LOUISVILLE.

Miscellany.

PASTEUR ON THE OBSERVATION OF PLAGUE. At the French Academy of Medicine, upon the 4th of March, there was a discussion in regard to proper methods of observing the plague in Astrakhan. During the discussion M. Pasteur was called upon for his opinion, and the following account of his remarks, from the Practitioner of London, will be found very interesting, embodying as they do the views of the greatest of modern germ theorists, and indicating the method of this school in the study of epidemic diseases generally. M. Pasteur said:

"I had resolved never to address this Academy except when I could submit to it positive, demonstrable facts. I crave pardon, then, if, moved by the observations of M. Marey, I attempt to speak on a subject of which I am ignorant. My excuse is that I am one of those individuals who believe in the germ theory as relates to contagious maladies. I believe in it because, having studied several of these maladies, I have obtained indisputable proof that they depend exclusively upon the presence and development of microscopic organisms. Naturally, therefore, I have certain views in regard to plague and the *desiderata* of its study, which I now venture to communicate to the Academy.

"If I were called upon to study plague in a locality where the disease was present, I should assume first (because at the commencement of every investigation it is necessary to have a preconceived idea to guide us) that plague is due to the presence and development in man of a microphyte or microzoaire. Starting from this view-point, I should devote myself exclusively to the culture of the blood and of various humors of the body, blood or humors being taken toward the close of life or immediately after death, in the end and with the hope of isolating and purifying the infectious organism, and especially with a view of obtaining it in a medium of culture disengaged from all association whatsoever with products known or unknown, living or dead, that the most fruitful imagination could suppose to exist in its company in the fertilizing droplet of the first culture. The analysis of the air of infected places, the chemical analysis of the blood of the sick, the microscopic analysis even of the blood, avail nothing for obtaining a precise knowledge of the properties of an infectious organism. Although it would be an error not to study microscopically with the greatest attention morbid products, it is necessary not to attach too great a value to this sort of examination, because very many circumstances may give rise in the body of a plague patient, dying or dead, to microscopic organisms. They may, moreover, exist there without the microscope discovering them. Moreover, by the side of these organisms of which we know not the properties, many pathogenic products and hidden causes of death may exist. In the actual state of science, the proof that a microscopic organism is by its development a cause of death, can not be decisive except on condition that this organism has undergone successive cultures, indefinitely repeated in liquids themselves inert; and that these liquids invariably show the same development, the same appearance of life, associated with the same virulence, as shown by the production of disease and death by their inoculation.

"How is this virulence to be proved? It is easy when the question refers to the contagious diseases of animals. In the case of plague it would be requisite to inoculate animals of divers species, preferably monkeys.

"It is necessary to undertake these difficult studies with a mind free from prejudice. They ought to be undertaken in the same methodical manner that a chemist delivers himself to the analysis of a mineral. To this end it is well to believe that the contagions and infections are neither so common nor so ready of transmission as might be imagined if their sudden and mysterious appearance were alone considered. So far as I am concerned, I should proceed to the study of plague when the disease is endemic without fear, on condition of taking the following precautions, and even these are probably exaggerated: I would wear spectacles furnished with cotton wool between their borders and the skin of the face; I would cover the mouth and the nose also with cotton wool; I would re-heat myself all my food; as drink I would take solely natural mineral waters or waters collected from their sources, or which had passed through several meters' thickness of soil. Under these cir-

cumstances the purity of the water is always irreproachable, as I demonstrated several years ago, in a work prepared in conjunction with M. Joubert. But any water may be used which has been subjected to a temperature of 110° to 120° C., and when cold shaken for a minute or two in contact with pure air in order to aërate it.

"Here is a fact which confirms what I say of the slight danger which attaches to the study, even assiduously, of contagious and infectious maladies. For about three years anthrax and septicæmia have been often studied in my laboratory. Not only have no accidents occurred to the persons engaged in the studies, but there has not been a single spontaneous death among the animals used for experiment. They are all kept more or less together in the same place, each in a special cage—its own residence, so to speak. Not a single hare or guinea-pig or sheep or even fowl has been infected by a neighbor of the same or of a different species. For several months a third infectious malady has been studied in the same laboratory. This malady is described in veterinary medicine as the 'epizootic of the poultry-yard' (*malade epizootique des basses cours*), and sometimes 'fowl-cholera' (*choléra des poules*). It is a terrible malady in its effects, contagious and infectious, capable of destroying in a few days the poultry of a farm. Thanks to M. Toussaint, the very able professor of the veterinary school of Toulouse, who sent to me in the month of December some blood of a young cock which had died of this disease, and in which he had distinguished a microscopic organism that he found also in all the animals he had inoculated with it, I have been able, aided by M. Chamberland and a young physician, M. Roux, to extract and cultivate in a state of purity the microscopic organism, the cause of the disease, and to demonstrate by the method of successive cultures to which I have referred that this organism, by its facile development in the body of animals of the poultry-yard, is the sole and indisputable cause of the malady. The fowls used for the experiments are placed in cages above each other, but an instance of spontaneous infection has never happened. Nevertheless nothing would be easier than to bring about mortality from this source. You have recently heard M. Davaine relate that in a place where many animals were brought together, some septic and some not, instances of infection occurred.

"The three maladies of which I speak—anthrax (*charbon*), putridity of blood (*septicæmia*), and fowl-cholera—exist in the state of germs bottled in my laboratory. At will during the last two years for the two first, and for several months for the third, these germs, always ready, can be poured out for new inoculations and new deaths.

"Suppose for a moment that these germs were transported to a village upon the right bank of the Volga, into the midst of crowded populations and unwholesome dwellings, such as M. Fauvel described to us on Tuesday last, and that by a puncture or otherwise these diseases should explode, do you imagine that matters would proceed as in my laboratory? No. A first patient would communicate the disease to his neighbors or his relatives, and you would presently witness all the effects and all the terror of anthrax and of septicæmia among men or among animals, and an epidemic of animals of the poultry-yard. There are no epidemic media [*milieux épidemiques* = epidemic constitutions]. That which to me corresponds to this term, as I have proved demonstratively for the pébrine of silk-worms, is a greater or less abundance of the germs of the disease. As regards prophylaxis, a knowledge of the properties of infectious microbia suggests more or less easily preventive means."

M. Pasteur terminated his observations by referring to a question of arresting the mortality among the poultry in a farm-yard then under his consideration, but without going into details of the means he would recommend either for fowl-cholera or anthrax or septicæmia, to both of which latter maladies he also referred in this connection.

M. Jules Rochard followed M. Pasteur, and pointed out that the sort of inquiries as to plague suggested by the last-named gentleman would be difficult of pursuit, if not impossible, under the conditions in which plague had to be studied on the Volga; and that of necessity almost all our studies there must be clinical and pathological, such as could be compassed by the aid of a thermometer, a microscope, and a box of re-agents, which may be carried about by the physician. As to the general precautions suggested by M. Pasteur, he condemned them as utterly inconsistent with the sort of work required from the physician, and as much out of place and as needless in plague as they would be in typhus, in small-pox, and in yellow fever.

NEWPORT, R. I.—This somewhat famous place appears to be in a fair way of losing

its prestige as a fashionable watering-place, and to become as publicly known for its unsanitary and dangerous conditions as it has heretofore been as a sanitary resort. We had occasion in our last number to quote the remarks of Col. Waring, made at a large public meeting for the consideration of tenement houses in New York, where he gave Newport as an example of intolerably filthy conditions, and yet "where the mere suggestion of sanitary reform would be considered an insult;" and in the previous number a contribution from Dr. Storer showing the fruitless efforts of the people to accomplish any thing for the promotion of the healthfulness of Newport through the public authorities. The conservation of the public health is made to depend upon the conceit of a board of aldermen, who resolve themselves into a "board of health" at will, on knowledge chiefly political and of a very common sort.—*Sanitarian.*

THE IMPORTANCE OF POST-MORTEM EXAMINATION.—At an inquest held at the Northeastern Hotel, Goole, before Dr. Grabham, coroner, on the body of William Colton, for many years parish sexton, who died very suddenly at Goole, Dr. Bramwell stated that he had made a post-mortem examination of the deceased, and found that he had been suffocated by a large oyster sticking in his throat. The coroner said that this showed the importance of a post-mortem examination being held in such cases. Had not one been held, a verdict of death from natural causes, which would have been incorrect, would have been returned.—*The Lancet.*

THE MIXED METAPHOR.—The Southern Practitioner, previous to astonishing its subscriber with a readable page or two in an extract upon "Public Executions," remarks: "Who would refuse to pick up a jewel, even though it be found in a dung-heap? The following *morceau* from the Louisville Medical News is so apropos," etc.

If our juvenile contemporary would forswear its uneducated company and penitentiary associations for awhile, and apply itself vigorously to the study of a French dictionary, it would discover that its jumble of "jewel" and "*morceau*" sounds a little odd to most people. However, the "meat upon which this our Cæsar feeds" may have been generally derived from the source mentioned, and he can see nothing out of the way in recommending a "morsel" from a place where he is accustomed to draw his rations.

IT is a little strange that all the hernias which have been brought before the Nashville (Penitentiary) College clinic have been incarcerated. There was a strangulated case in the institution, but it was removed to a neighboring hill.

CHEST-CLINIC AT THE NASHVILLE PENITENTIARY COLLEGE.—Professor (to student examining heart of patient): "Well, sir, what do you hear?" Student: "A gallows murmur." Professor: "Confound it! I told you *bellows* murmur. Do n't give the institution away."

THE Nashville Penitentiary College boasts that the only deaths which have occurred among the patients of its clinics have been due to an endemic of sheriff. And yet we can 't always take the word of the Nashville College in these matters, for several cases of death from hemp narcotism were returned simply as "suspended animation."

> "What constitutes a state?
> Not high-raised battlement or labored mound,
> Thick wall or moated gate."

No; but with several hundred convicts, a half dozen or so little "professors," and a smaller journal, they constitute a medical college at Nashville,

"Where low-born baseness wafts perfume to pride."

THE Nashville College gets in a high dungeon at our just criticisms.

A FRENCH CRITIC ON CLAUDE BERNARD'S SUCCESSOR.—I was present at one of Brown-Séquard's first lectures, and was struck with his contempt for accepted theories. This amounts almost to aversion. He is an iconoclast in his department of science—tearing down not only the theories of others, but even his own, which were the deductions of marvelous experiments. As a theorist he is audacious; not aspiring to build a lasting edifice, he is content to erect a tabernacle, a place of rest, amid the ruins of accepted theories. He fears lest this unsheltered desolation may frighten timid spirits. Moreover he says that theories always possess this much of good: they invite antagonism, and make us labor to prove or disprove them. They give way to each other in rapid succession in times of progress, and when they do not exist it is proof of intellectual laziness and decay. For this year he has chosen as his theme "the criticism of the theories of localization and of all the reigning doc-

trines concerning the nervous system." In listening to him, one is startled at the boldness of his views, and yet 't is the voice of the charmer who knows well the art of ingratiating himself with his audience and of subjugating the most rebellious.—*Dr. Victor Revillout, in Gaz. des Hôp.; Hosp. Gazette.*

A SUBSTITUTE FOR THE HORSE.—A number of country practitioners in England are employing bicycles or tricycles as a means of locomotion, and the use of these vehicles is increasing considerably. They do not supply the place of a horse entirely, but they enable the physician to do away with an extra one. The bicycles are made of iron and steel, the rim of the wheel being covered with rubber. On them one can travel over tolerably rough and icy roads and up quite steep grades. Over good ground the rate of speed is a mile in five minutes; racing speed being, however, much greater. The ordinary rate of travel is eight or ten miles an hour. Tricycles are also made, which are safer than the bicycles and nearly as fast. In these the rider sits between two wheels which he propels by a treading motion; a third and guiding wheel is placed in front. There are very likely many places in this country where this mode of locomotion could be used with advantage.—*Medical Record.*

Selections.

On the General Pathology of Ear-Disease.—George P. Field, Aural Surgeon to St. Mary's Hospital, London, in Medical Press and Circular:

Pathology has certain laws to which all tissues are liable, and the structures of the ear form no exception to this rule. We may therefore say that the ear has no special pathological anatomy, or very little; the special interest that attaches to the pathological changes occurring in it is the effect which they produce upon the organ of hearing, and the relation which the diseased part bears to the surrounding structures. I desire to point out the analogies existing between the diseases of the tissues of the ear and those occurring in similar tissues elsewhere in the body, and thus to see from the broader standpoint the general laws or first principles which should always guide our diagnosis, prognosis, and treatment.

Let us then briefly proceed to trace these general principles in relation to the tissues forming the external ear. Here we find skin, subcutaneous cellular tissue, fat, a small amount of muscle, and yellow elastic fibro-cartilage, with some fibrous tissue forming ligaments. These tissues we find affected exactly as in other parts; thus, take the skin, erythema, eczema, psoriasis, pemphigus, lupus, ichthyosis, and purpura may all affect the skin of the ear as they do that of other parts, and in each condition a constitutional or local cause must be looked for; we should remember that erythema is often a manifestation of rheumatism, and seek for it accordingly in the patient, or, on the other hand, that it may be of reflex production, and due to disordered stomach or uterus. Eczema may be gouty, or due to local causes; thus the position and shape of the organ will suggest intertrigo, and its proximity to the scalp the possibility of a vegetable or animal parasite. Psoriasis again may have one of its numerous constitutional causes, or be apparently purely a local disease; the pemphigus and lupus will probably depend upon syphilis, and the ichthyosis have a congenital origin. Remembering the isolated position of the auricle and its exposure of a large surface for the radiation of its heat, we shall not be surprised to find it affected with gangrene, due either to impoverished blood or enfeebled circulation and diseased vessels; thus it is common in feeble infants; after typhus or other fevers; in heart disease or general atheromatous degeneration of the vessels, or after frost-bite. The subcutaneous cellular tissue may become inflamed, either from injury or the poison of erysipelas.

New growths found in the auricle will owe their origin to the tissues of which it is formed, and the analogies of these tissues in similar parts of the body will suggest the nature of the tumor. Thus the subcutaneous tissue will give rise to fatty and sebaceous tumors, and that part where it is most abundant, namely, the back of the auricle and lobule, will be the favorite sites for such new growths; fibrous thickenings, the result of the irritation of ear-rings, sometimes amounting to tumors or even to the more dangerous keloid, also occur here; the latter is especially seen affecting the lobule in negresses.

Large nævi, like those common enough in the scalp, are occasionally found in the auricles.

Hæmatoma auris (othæmatoma) is a curious affection resulting from inflammation of the cartilages of the ear; the perichondium is raised by the effusion of the products of inflammation, and there is much swelling of an inflammatory nature combined with effusion of blood in the cellular tissue of the concavity of the auricle, as well as below the perichondium. The inflammation commonly subsides and a cretaceous or bony nodule often results.

Passing inward toward the external meatus we must look for its diseases among those which affect similar parts of the body, namely, where skin is about to change to mucous membrane. Some of these are very characteristic; we see them on the lip, about the anus and genital orifices. The diseases to which these parts are especially liable are epithelioma and condylomata. Epithelioma of the auricle is not unfrequent, and it takes origin more commonly from the central part in the immediate neighborhood of the meatus than at the pheriphery; this distinguishes it in some measure from lupus and perhaps from rodent ulcer, which may be regarded as a special form of epithelioma, having a clinical history and appearances peculiar to itself; both of these diseases may affect the auricle, but take origin more frequently at its periphery. The malformations of these parts can scarcely be said to be the results of diseased action.

While studying the diseases of the external meatus we shall as usual find a key to them in the anatomical structure of the part. It will be remembered that the outer half of the passage is formed by cartilage, the inner half by bone; the skin is thicker over the

outer half, where it consists of both cuticular layer and corium, and contains hairs, follicles, and ceruminous glands, while the inner half is lined by skin, which consists only of a cuticular layer, the corium being blended with the periosteum of the bony walls of the tube. Upon this anatomical basis we may build up the pathological history of the part.

Von Tröltsch has pointed out that the common term "catarrh of the external meatus" has anatomically no justification whatever, "except perhaps" (as Schwartze says), "in those cases in which the epidermis has been destroyed, as for instance, in acute moist eczema." A discharge of pus from the external meatus nearly always proceeds from the middle ear through perforation in the tympanum. The various forms of chronic suppurative inflammation of the external meatus may be grouped together under the name of *otitis externa*, but it is always desirable to seek as far as possible their ultimate cause. The skin of the meatus may be affected by erythema, eczema, herpes, pemphigus, and erysipelas. The outer half of the canal is subject to an ordinary phlegmonous inflammation of the corium and subcutaneous cellular tissue, while the inner half, if inflamed, suffers from a periostitis, for its corium forms periosteum, and it has no subcutaneous tissue; caries or necrosis may result from this if inflammation be severe.

Furuncles are common affections in this position; they are inflammations commencing apparently in the follicles of the ceruminous glands; they occur therefore in the locality where these bodies are to be found, namely, in the anterior lower wall of the meatus. These inflammatory changes often lead to stricture of the meatus, and thus call for surgical interference; things therefore which would be of little importance elsewhere, eczema for instance, occurring here are frequently of the gravest moment, for chronic eczema induces hypertrophy of the corium and stenosis of the meatus (Schwartze).

Tumors causing strictures of the canal are not unfrequent, and take their origin from the anatomical elements. The ceruminous glands will produce when obstructed sebaceous tumors or cholesteatometa. The cartilage forming the wall of the meatus gives rise to enchondroma; the bone at the inner end of the canal produces exostoses of two kinds, the inflammatory and the non-inflammatory. Sarcomata doubtless occasionally occur here, but little is known about them, and none have been recorded under that name. Indeed it appears particularly noteworthy how little liable the external meatus is to malignant growths, especially when we consider the great amount of chronic irritation to which it is liable by many of its diseases, such as irritating discharges from the middle ear, chronic eczema, and the presence of inflamed ceruminous and sudoriferous glands or of accumulations of hardened and irritating concretions of wax. Such irritations as these we have good evidence of as causes of malignant growths in other parts of the body, and I have strong suspicions that many of the so-called aural polypi which show such great proneness to recur, may with great propriety be ranked among the sarcomata. Among these we should probably find examples that might be classed as fibro-sarcoma, round-celled (or granulation) sarcoma, myxo-sarcoma, osteo-sarcoma, and osteo-chondromata.

The pathology of the membrana tympani appears at first sight complicated, and its anatomical structure is the key to all the changes to which it is liable. It consists of a layer of skin, chiefly composed of epithelium, with a very delicate and imperfect corium, a fibrous membrana propria, and a layer of mucous membrane. Each lamella has a pathology of its own, and every inflammation of the structure commences in only one layer though it may eventually involve all. Thus the outer layer of skin is liable to eczema, pemphigus, and epithelial growths; it is also liable to idiopathic or traumatic inflammations, either acute or chronic, but these are rare. In acute inflammation of this layer the epithelium is raised up and subsequently destroyed by the swelling of the corium, due to exudation of leucocytes and proliferation of connective tissue cells. It is evident that such changes as these will produce permanent thickenings and opacities of the membrane. Very frequently the inflammation involves all three lamellæ, and sometimes they produce ulceration and perforation, though this is rare. The middle or fibrous layer is especially liable to calcareous deposits, chiefly urate of soda occurring in gouty individuals; sometimes to fatty deposits, and also occasionally to increased growth of connective tissue. Other calcareous deposits, the residue of bygone inflammations are also found in the membrane. These, however, usually include all three layers; they commence most commonly in the internal layer; sometimes they are the results of inter-lamellar abscesses. A new growth of the bone has been demonstrated in the neighborhood of these old inflammatory calcareous deposits by Politzer and Wendt. The membrana propria having a deficient supply of blood-vessels is the least liable of the three lamellæ to inflammatory changes. On the other hand the internal or mucous layer for the opposite reason is, like other mucous membranes, especially liable to inflammatory changes. These we shall have to allude to more particularly when speaking of the mucous membrane lining the tympanum. The inflammation may be catarrhal or of a more severe character, often producing perforation of the membrane. Minute tubercles occur in this membrane, in the submucous tissue, and are occasionally seen in acute tuberculosis; they may thus lend an important aid to the diagnosis of an obscure medical case, just as we find in similar cases tubercles in the choroid, which will often clear up otherwise obscure symptoms. At present, observations of this nature have been so rarely made that it is impossible to say with what degree of frequency they will be found, or whether they are more particularly associated with tubercular meningitis than the tubercle elsewhere; the examination of the membrane is manifestly less painful to patients with meningitis than that of the retina; while in many cases severe photophobia exists and entirely precludes all possibility of observations upon the latter; examination of the membrane for tubercle appears to me worthy the attention of physicians. Inflammations of the internal layer often produce enormous thickenings of it, sometimes so much as to increase by five times its normal thickness.

Specialties in America. — Correspondence of the *Gazette Hebdomadaire*: The specialties begin to strictly divide themselves in this country. In the *Ecole de Mèdicine*, of Nashville, which connects itself with the penitentiary-house of Tennessee, the professor demanded of a patient for what he was admitted, meaning to the hospital. But the condemned one, thinking he meant the penitentiary-house, said "for arson." Then the professor remarked that he had better return to the Rectal Clinique.